

06/22/99

U.S. DEPARTMENT OF COMMERCE
PATENT AND TRADEMARK OFFICE

**UTILITY PATENT APPLICATION
TRANSMITTAL LETTER
UNDER 37 C.F.R. 1.53(b)**

ATTORNEY DOCKET NO.:
22553/17

Address to:
Assistant Commissioner for Patents
Washington D.C. 20231
Box Patent Application

1c518 U.S. PTO
09/338221
06/22/99

Transmitted herewith for filing is the patent application of

Inventor(s): **Eli PINES and William J. WHITE**

For : **THERAPEUTIC FIBRINOGEN COMPOSITIONS**

Enclosed are:

1. 47 sheets of specification, 6 sheets of claims, and 1 sheet of abstract
2. 0 sheets of drawings.
3. Declaration and Power of Attorney (copies from prior application (37 CFR 1.63(d))
(See paragraph 4 below).

Incorporation by Reference. The entire disclosure of the prior application, from which a copy of the oath or declaration is supplied under paragraph 3 above is considered as being part of the disclosure of the accompanying application and is hereby incorporated by reference therein.

5. A verified statement claiming small entity status is enclosed in prior application Serial No. 08,024,121 filed on March 1, 1993 and is still proper.
6. Continuing application information:

This application is a continuation of prior application Serial No. 08/805,703, filed February 25, 1997 which is a divisional of application Serial No. 08/225,853, filed April 8, 1994, now U.S. Patent No. 5,605,887, which is a divisional of application Serial No. 08/024,121, filed March 1, 1993, now U.S. Patent No. 5,330,974.

Other enclosures:

Return Receipt Postcard

8. The filing fee has been calculated as shown below:

	NUMBER FILED	NUMBER EXTRA*	RATE (\$)	FEE (\$)
BASIC FEE				760.00
TOTAL CLAIMS	25 - 20 =	5	18.00	90.00
INDEPENDENT CLAIMS	4 - 3 =	1	78.00	78.00
MULTIPLE DEPENDENT CLAIM PRESENT			260.00	--
*Number extra must be zero or larger			TOTAL	928.00
If applicant is a small entity under 37 C.F.R. §§ 1.9 and 1.27, then divide total fee by 2, and enter amount here.			SMALL ENTITY TOTAL	464.00

8. Please charge the required application filing fee of \$ 464.00 to the deposit account of **Kenyon & Kenyon**, deposit account number **11-0600**.
9. A **three-month extension** of time is being filed in parent application Serial No. 08/805,703. A copy is enclosed herewith.
10. The Commissioner is hereby authorized to charge payment of the following fees, associated with this communication or arising during the pendency of this application, or to credit any overpayment to deposit account number **11-0600**:
 - A. Any additional filing fees required under 37 C.F.R. § 1.16;
 - B. Any additional patent application processing fees under 37 C.F.R. § 1.17;
 - C. Any additional patent issue fees under 37 C.F.R. § 1.18;
 - D. Any additional document supply fees under 37 C.F.R. § 1.19;
 - E. Any additional post-patent processing fees under 37 C.F.R. § 1.20; or
 - F. Any additional miscellaneous fees under 37 C.F.R. § 1.21.
11. A copy of this sheet is enclosed.

Dated: 6/22/99

By: _____

Donna M. Praiss
Donna M. Praiss (Reg. No. 34,232)

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GP 1654 \$

U.S. PTO
06/22/99

U.S. DEPARTMENT OF COMMERCE
PATENT AND TRADEMARK OFFICE

**REQUEST FOR EXTENSION OF TIME
PURSUANT TO 37 C.F.R. § 1.136(a)**

Docket Number:
22553/16

Application Number
08/805,703

Filing Date
February 25, 1997

Examiner
A. Gupta

Art Unit
1654

Invention Title
THERAPEUTIC FIBRINOGEN COMPOSITION

Inventor(s)
Eli PINES and William J. WHITE

Address to:
Assistant Commissioner for Patents
Washington D.C. 20231

I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail in an envelope addressed to: Assistant Commissioner for Patents, Washington, D.C. 20231 on

Date: 6/22/99
Signature: Donna M. Praiss Reg. No. 34,232
Donna M. Praiss

Applicant respectfully requests a three month extension of time in which to respond to the Office Action dated December 22, 1998, for which a response period expiring on March 22, 1999 was set. The extended period expires on June 22, 1999.

1. The Commissioner is hereby authorized to charge payment of the 37 C.F.R. § 1.136(a) extension fee of \$435.00 to the deposit account of **Kenyon & Kenyon**, deposit account number 11-0600. The Commissioner is also authorized to charge any additional fees or credit any overpayment in connection with this paper to Deposit Account No. 11-0600.
2. A duplicate copy of this form is enclosed.

Dated: 6/22/99

By: Donna M. Praiss
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